

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>HH</i>	<i>70591</i>	<i>11/27</i>
O.P.E. CLASSIFIER		<i>12</i>	
FORMALITY REVIEW	<i>SS</i>	<i>69134</i>	<i>11-29-00</i>
RESPONSE FORMALITY REVIEW	<i>"</i>	<i>61</i>	<i>3-1-01</i>

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	6/10/5
2	10/2/2
3	11/22/5
4	17/11/9
5	10/1/02
6	02/03/04
7	
8	
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12	✓
13	✓
14	✓
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Claim	Date
Final Original	
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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